

## Williamstown Township

4990 Zimmer Rd., Williamston, MI 48895 WilliamstownTownship.com P. (517)655-3193 | F: (517)655-3971

IN ORDER TO OBTAIN A BUILDING PERMIT FOR A **REROOF**, THE FOLLOWING DOCUMENTS ARE REQUIRED:

COMPLETED BUILDING PERMIT APPLICATION
PROOF OF OWNERSHIP
COPY OF CURRENT BUILDERS LICENSE (or have one on file at Township Office)
SIGNED INSURANCE ADDENDUM (commercial buildings are exempt)
APPLICATION FEE

\*REMINDER\* Permit must be <u>ISSUED</u> before work begins. Submittal of an application does not allow you to start the project. Fines may be issued for non-compliance.

24- HOUR NOTICE REQUIRED FOR ALL INSPECTIONS 517 521-4929

## BUILDING PERMIT APPLICATION

B,P. No.

TOWNSHIP OF WILLIAMSTOWN PLEASE PRINT

Date		PHO	NE (5	1 <mark>7</mark> ) 6	55-31	93 I I	FAX (517)	655-	-3971			Final Date
Application for:	Construction	□ Remo	odel	□ A	ddition ign		Accessory Grading		Demolition Other	□ Reroof		
Describe Work:												
Street Address							City			Post Office	е	
_ot No.	Subdivision				Ema	ail						
							710		Dhone		_	
Dwner		Mailing A	ddress				ZIP		Phone			
Contractor		Mailing A	ddress				ZIP		Phone			License No.
Architect or Designer		Mailing A	ddress				ZIP		Phone			Registration No
ngineer		Mailing A	ddress				ZIP		Phone			Registration N
Size of Structure			Valuat	tion of	Work \$				Permi	t Fee		
-		Sig	nature	FO	TOWN	CUID I	JSE ONLY	-	Da	te		
Water & Sewer Water Permit No. Sewer Permit No. Sewer Final Inspection Soil Erosion Permit No.						В	ccupancy Gro Sidwell uilding Site P	No.				
Driveway Permit No  Permit to be sent to: □ O				-		1 ~	oproved by_		lood Plain			Conforming
Application Accepted By:					ate			□ V	Vetlands			Nonconforming
Fee Received:				_ D	ate				nconforming essed Value o			
Ву					No			-				
☐ <i>A</i> Building Permit No.	Approved	ding Officia		Denie				or U	nconforming	Variance I	□ Ap	Conforming Nonconforming oproved
SPECIAL CONDITIONS:	-		-	_	-			Site	Plan  App Approved w/ E: ALL CON	Conditions roved Conditions	Date  Date  ON S	SHALL COMPLY
				-				WITH RESI	THE PROVIDENTIAL C	/ISIONS O ODE OF _	FTH	HE MICHIGAN

## INSURANCE ADDENDUM TO BUILDING PERMIT APPLICATIONS

(To be filed by Residential Builders or Licensed Applicant)

1.	1. Name	Phone						
2.	2. Address City	State	Zip					
3.	3. License Number							
	Expiration Date	*						
4.	4. Insurance Company providing Commercial Comprehensi applicant	ive General Liability in	surance for					
5.	5. Workers Compensation Insurance Carrier Or reason for exemption		<del> </del>					
6.	6. IRS Employer Identification Number	<del>us emis and emis a den</del>	<del></del>					
	Or reason for exemption	CONTRACTOR OF THE CONTRACTOR O	<del></del>					
7.	7. MESC Employer Number		<del></del>					
	Or reason for exemption							
	(6)							
	Section 23a of the State Construction Code Act of 1972, Act No. 23o of to f the Michigan Compiled Laws, prohibits a person from conspiring to state relating to persons who are to perform work on a residential be Section 23a are subject to civil fines.	circumvent the licensing	requirements of this					
P:	Printed name of Applicant							
Si	Signature of Applicant							
Date of Application								

(Form for compliance with Public Act 135 of 1989 – 11-2-89)

Revised 11/25/2015